## License Type: 34 One Day Beer & Wine License Nontransferable

LICENSE NO. 9532311 Receipt No. 2499437

Fee Paid

\$50.00

Geographical Code 1933

## APPLICATION:

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the above designated license(s) for the location also described below.

ORGANIZATION:

HOLLYWOOD FOREVER INC-ENDOWMENT CARE & MEMORIAL CARE

LOCATION ADDRESS:

5970 SANTA MONICA BLVD LOS ANGELES, CA 90038

TYPE OF EVENT:

OTHER EVENT

HR/DATES DURING WHICH

May 13, 2018

ALCOHOL WILL BE SOLD:

6PM-10PM

ESTIMATED ATTENDANCE:

195

AUTHORIZED REPRESENTATIVE / ADDRESS

JAY BOILEAU

5970 SANTA MONICA BLVD LOS ANGELES, CA 90038

## LICENSE:

The above-named organization is hereby licensed, pursuant to Section 24045.1 of the Business and Professions Code and Rule 59.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above-named location for the period authorized below. This license does not include off-sale ("to-go") privileges. This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.



Good for I day(s). Date Issued May 10, 2018.

Director of Alcoholic	Beverage Control
By	

						Edmur	d G. Brown Jr., Governor
DAILY LICENS	E APPLICA	TUA/NOITA	HORIZATION - N	Ion Transferab	ie		
Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit http://www.abc.ca.gov/distmap.html				1533311	GEO CODE		
			amed below, the undersign	ed hereby applies for the	e	RECEIPT NUMBER	127
license(s) described be		o gameanian m		on mereey approved for an		FEE	101
						\$ 50	
1. ORGANIZATION'S NAME				CONDITIONS REQUIRED		DIAGRAM REQUIRED	
Hollywood Forever	Inc Endowr	ment Care & N	Memorial Care	Yes	No	Yes	No
2. LICENSE TYPE	(Check appropr	iate license typ	e AND organization typ	e)			
a Daily Genera			r, wine and distilled spir	rits)			
	rty/Affiliate Sup ce or Ballot Mea		ate for	Fraternal Organ with Regular Me		Existence Over Fiv	e Years
Organization	on Formed for S	pecific Charital	ole or Civic Purpose	Religious Organ	nization		
Other:				Vessel per Sect	tion 24045.	10 B&P (\$50.00)	
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hamod		NUMBER OF DISPENSIN	IG POINTS
b. Special Daily	Beer (\$25.00)		Special Daily Bee	r & Wine (\$50.00)		Special Daily	Wine (\$25.00)
Charitable	Fraternal	Social	Political	Other:			
Civic	Religious	Cultural	Amateur Sports	Organization		NUMBER OF DISPENSI	NG POINTS
c Special Tem	porary License	e (\$100.00)	(Different priviled	ges depending on sta	atute)		
C . 1			r 24045.9 B&P			ine Sale per Section	24045 8 B&P
			5.4 and 24045.6 B&P			d Charitable Organ	
	sorporation per	Occions 2404	0.4 and 24040.0 Dai	Section 24045.		onantable organ	nzation per
Other Specia	al Temporary l	icenses, per	Section				
License num	ber	**************************************	Amount	\$			
3. EVENT TYPE Dinner	Dance	Wedding	Lunch Picnic	Barbeque	[]Social	Gathering (	Festival
Sports Event	Concert	Birthday	Mixer Carniva	k	Other:	Lecture	estival
4. TOTAL # OF DAYS	5. ESTIMATED ATT	L1	6. HOURS OF ALCOHOLIC BEV	1		MPTION	
1	195		From 6pm		То	Dopm AP	
7. EVENT DATE(S)	4.0			8. EVENT IS OPEN TO THE	P	OfAla	1220
Sunday 05.13.20		troat number and com-	a and alta)	Yes	No	ODOLO	~ <01b
			onica Blvd, Los Ar	ngeles, CA 9003	38	AM	Bever
10. LOCATION IS WITHIN		11. TYPE OF ENTER		12. SECURITY GUARDS			ma se Con
Yes	No	Lecture		Yes	No	If yes, how r	Steverage Control Stelephone NUMBER
<ol> <li>13. AUTHORIZED REPRES Jay Boileau</li> </ol>	SENTATIVE'S NAME			•		14. REPRESENTATIVE	S TELEPHONE NUMBER
15. REPRESENTATIVE'S A	ADDRESS						
6000 Santa Monica							
16. ORGANIZATION'S MAI							
6000 Santa M	SENTATIVE SIGNAT	URE Angele	es, CA 90036			18. DATE SIGNED	
						04.11.2018	
PROPERTY OWNER APPR Yogu Kanthiah	ROVAL BY (Name), RE	EQUIRED	PHONE NUMBER	PROPERTY OWN	- '	RE	DATE SIGNED
LAW ENFORCEMENT APP	PROVAL BY (Name), I	FAPPLICABLE	PHONE NUMBER	LAW ENFORCE		URE)	04.11.2018 DATE ISIGNED
OFFICER A	FULANK	オカイカラン		1		()	4/12/18
DISTRICT OFFICE APPRO	OVAL BY (Name)		n e. 1 e	ABC EMPLOYEE	E SIGNATURE		ISSUANCE DATE

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